

## APPLICATION FOR BUILDING PERMIT

1

COUNTY OF LOS ANGELES  
DEPARTMENT OF COUNTY ENGINEER  
BUILDING AND SAFETY DIVISION  
MAKE CHECKS PAYABLE TO:  
HARVEY T. BRANDT, COUNTY ENGINEER

FOR APPLICANT TO FILL IN  
(Print or type only)

|   |   |
|---|---|
| BUILDING ADDRESS <b>23024 NORMANDIE</b>         |   |
| LOT NO. <b>379 + 328</b>                        | BLOCK                                   |
| TRACT <b>1818</b>                               |   |
| SIZE OF LOT <b>50 X 125</b>                     | NO. OF BLDGS. NOW ON LOT <b>NONE</b>    |
| USE OF EXISTING BLDG. <b>NONE</b>               |   |
| OWNER <b>EDDIE GRADE</b>                        | TEL. NO. <b>8303046</b>                 |
| ADDRESS <b>1526 N. LAGOON</b>                   |   |
| CITY <b>WILMINGTON</b>                          |   |
| ARCHITECT OR ENGINEER <b>COBB</b>               | TEL. NO. <b>534397</b>                  |
| ADDRESS <b>3142 P.C.H. TORRANCE</b>             |   |
| CONTRACTOR                                      | TEL. NO.                                |
| ADDRESS   | LIC. NO.                                |
| CITY  | LIC. CLASS                              |
| CONSTRUCTION LENDER NAME AND BRANCH <b>NONE</b> |   |
| ADDRESS   |   |
| SQ. FT. SIZE <b>216</b>                         | NO. OF STORIES <b>1</b>                 |
| USE OF STRUCTURE <b>SNACK BAR</b>               | NO. OF FAMILIES                         |
| <b>TOILETS</b>                                  |   |
| SIGNATURE OF APPLICANT <b>Eddie R. Grade</b>    | NEW <input checked="" type="checkbox"/> |
| VALUATION \$ <b>3,000</b>                       | ADD <input type="checkbox"/>            |
|   | ALTER <input type="checkbox"/>          |
|   | REPAIR <input type="checkbox"/>         |
|   | DEMOL <input type="checkbox"/>          |

|  |                          |
|--|--------------------------|
| P.C. FEE \$ <b>13.20</b>   | PMT. FEE \$ <b>22.00</b> |
| I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL ORDINANCES AND LAWS REGULATING BUILDING CONSTRUCTION. I CERTIFY THAT IN DOING THE WORK AUTHORIZED HEREBY I WILL NOT EMPLOY ANY PERSON IN VIOLATION OF THE LABOR CODE OF THE STATE OF CALIFORNIA IN RELATING TO WORKMEN'S COMPENSATION INSURANCE. |                          |
| SIGNATURE OF PERMITTEE <b>Eddie R. Grade</b>   |                          |
| ADDRESS <b>1526 N. Lagoon Wilmington</b>   |                          |

|   |                       |  |
|---|-----------------------|--|
| ASSESSOR MAP BOOK   | PAGE                  | PARCEL                                 |
| BUILDING ADDRESS <b>23024 S. Normandie Ave</b>  |                       |  |
| LOCALITY <b>Co. Carson</b>  |                       |  |
| NEAREST CROSS ST. <b>230th</b>  |                       |  |
| DISTRICT NO. <b>1.2</b>   | GROUP                 | TYPE CONST. <b>Toilets</b>             |
| STATISTICAL CLASSIFICATION  |                       | PROCESSED BY <b>State Bldg. Bureau</b> |
| CLASS NO. <b>20</b>   | DWELL. UNITS <b>2</b> | SEWER MAP <b>B&amp;W PG 17</b>         |
| USE ZONE <b>M1</b>  | MAP NO. <b>4231</b>   |  |
| SPECIAL CONDITIONS  |                       |  |
| BLDG. SETBACK FROM FRONT PROP. LINE OF <b>Normandie Ave</b> (STREET)  |                       |  |
| TYPE OF HIGHWAY   | EXISTING WIDTH        | SETBACK FROM C.L.                      |
|   |                       |  |
| BLDG. SETBACK FROM SIDE PROP. LINE OF (STREET)  |                       |  |
| TYPE OF HIGHWAY   | EXISTING WIDTH        | SETBACK FROM C.L.                      |
|   |                       |  |
| CORNER CUTOFF YES <input type="checkbox"/> NO <input type="checkbox"/>  |                       |  |
| SEE REVERSE SIDE FOR SPECIAL APPROVALS  |                       |  |
| <b>FOR SWAP MEET, No subdivision</b><br><b>reg. one building only</b><br><b>10-26-72</b><br><b>Expired no inspection 12-31-72</b> |                       |  |
| FOUNDATIONS: LOCATION FORMS, MATERIALS  |                       |  |
| FRAME: FIRE STOPS, BRACING, BOLTS   |                       |  |
| FURNACE: LOCATION, GAS VENT, DUCTS  |                       |  |
| LATH, INT.  |                       |  |
| LATH, EXT.  |                       |  |
| HOUSE NUMBER CORRECT AND POSTED   |                       |  |
| FINAL   |                       |  |

INSPECTOR COPY

PLAN CHECK VALIDATION

CASH

PERMIT VALIDATION

CASH

No 11776 ST 2623A 13204  
504075 FEB 2 1A 22.00  
5040 13 FEB 2  
P. S mith

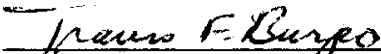
| SPECIAL APPROVALS                                  |          |    |           |               |               |
|--|----------|----|-----------|---------------|---------------|
|  | REQUIRED |    | DATE SENT | DATE RETURNED | DATE APPROVED |
|  | YES      | NO |           |               |               |
| WATER CERTIFICATE                                  |          |    |           |               |               |
| ROAD DEPT.   |          |    |           |               |               |
| HEALTH DEPT.                                       |          |    |           |               |               |
| FIRE DEPT.   |          |    |           |               |               |
| GRADING  |          |    |           |               |               |
| GEOLOGICAL   |          |    |           |               |               |
| PEDESTRIAN PROTECTION<br>(FENCE) (CANOPY)          |          |    |           |               |               |
| SPECIAL INSPECTION ON<br>(CONC.) (MASRY.) (WELDG.) |          |    |           |               |               |
| LOT DRAINAGE                                       |          |    |           |               |               |
| PARKING  |          |    |           |               |               |
|  |          |    |           |               |               |
|  |          |    |           |               |               |
|  |          |    |           |               |               |
|  |          |    |           |               |               |
|  |          |    |           |               |               |

| PLANS TO APPLICANT |      |          |      | NO.<br>REC'D |
|--------------------|------|----------|------|--------------|
| TO:                |      | RETURNED |      | APPROVED     |
| NO                 | DATE | NO       | DATE |              |
|                    |      |          |      |              |
|                    |      |          |      |              |
|                    |      |          |      |              |
|                    |      |          |      |              |
|                    |      |          |      |              |

# APPLICATION FOR PLUMBING PERMIT

COUNTY OF LOS ANGELES  
DEPARTMENT OF COUNTY ENGINEER  
BUILDING AND SAFETY DIVISION

**HARVEY T. BRANDT, COUNTY ENGINEER**

| FOR APPLICANT TO FILL IN (PRINT OR TYPE)  |                           |   |       |
|---|---------------------------|---|-------|
| NUMBER  | FIXTURE OR ITEM           | @   | FEE   |
| 2   | WATER CLOSET              | 1.75  | 3 50  |
|   | BATH TUB                  | 1.75  |       |
|   | SHOWER                    | 1.75  |       |
| 2   | LAVATORY                  | 1.75  | 3 50  |
|   | SINK                      | 1.75  |       |
|   | DISHWASHER                | 1.75  |       |
|   | CLOTHES WASHER            | 1.75  |       |
|   | SWIMMING POOL RECEPTOR    | 1.75  |       |
|   | LAWN SPRINKLER SYSTEM     | 1.75  |       |
|   | WATER HEATER              | 1.75  |       |
| 1   | GAS SYSTEM 2 OUTLETS      | 1.75  | 1 75  |
|   | OUTLETS OVER 5 PER SYSTEM | .30   |       |
|   |                           |   |       |
|   |                           |   |       |
|   |                           |   |       |
|   |                           |   |       |
| Plan check fee  |                           | See Reverse   |       |
| PLUMBING PERMIT ISSUING FEE \$  |                           |   | 3 00  |
|   |                           | TOTAL FEE   | 11 75 |
| Plan check applicant  |                           |   |       |
| Name  |                           |   |       |
| Address   |                           |   |       |
| City  |                           | Tel. No.  |       |
| <p>I HEREBY ACKNOWLEDGE THAT I HAVE READ THIS APPLICATION AND STATE THAT THE ABOVE IS CORRECT AND AGREE TO COMPLY WITH ALL COUNTY ORDINANCES AND STATE LAWS REGULATING PLUMBING.</p> <p>I HEREBY CERTIFY THAT I AM PROPERLY REGISTERED AND/OR LICENSED AS REQUIRED BY LOS ANGELES COUNTY AND STATE OF CALIFORNIA OR THAT I AM THE LEGAL OWNER OF, AND INTEND TO RESIDE IN THE ABOVE DESCRIBED RESIDENTIAL PROPERTY.</p> |                           |   |       |
| SIGNATURE OF PERMITTEE  |                           |  |       |

[illegible]

INSPECTOR COPY

## PLAN CHECK VALIDATION

CK.      M.O.      CASH

## PERMIT VALIDATION



M.O. CASH

498 FEB 25 5 A  
498 74 FEB 25

1 1.75 ..

Herb. d. d. f.

Ordinance No. 2269, the Plumbing Code, requires a plan check fee to be paid at the time of submitting plans and specifications based on the following:

- |  |   |
|--|---|
| a) A single building containing more than 180 drainage fixture units.  | 25% of the Plumbing PERMIT FEE required.                |
| b) A portable water line serving one or more buildings with an aggregate demand of more than 180 water fixture units or 100 GPM (excluding buildings under item "a." and minor accessory buildings). | \$20.00 & \$1.00 for each additional building over one. |
| c) A fuel gas line serving one or more buildings with an aggregate demand of 2,000,000 BTU's or more (excluding buildings under item "a" and minor accessory buildings).                             | \$20.00 & \$1.00 for each additional building over one. |
| d) A sewer collection system serving more than one building with an aggregate load of more than 180 drainage fixture units. (Excluding minor accessory buildings).                                   | \$10.00 & \$1.00 for each additional building over one. |

2000-486 3/72

COMITA B/S

COUNTY OF LOS ANGELES FIRE DEPARTMENT

TO: Department of County Engineer  
Building and Safety Division

SUBJECT: Approval To Occupy Premises

On Jan 30, 1974 an inspection was made at:

Name of Business Grade Swap Meet F-2 Snack Bar

Address 23024 So Normandie, Torrance Carson

Sufficient compliance with Fire Department requirements has  
been made to permit occupancy of premises.

N. K. Booth  
Captain - Inspector

jz